



FEE TRANSMITTAL FOR FY 2001

TOTAL AMOUNT OF PAYMENT (\$) 1600.00

Complete if Known:

Application No. 08/941,466
Filing Date 09/30/1997
First Named Inventor Zandi
Group Art Unit 2623
Examiner Name Johnson, T.
Attorney Docket No. 74451.P024C

METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666
Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed: ☒ Check
☐ Credit Card
☐ Money Order
☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
101	710	201	355	Utility application filing fee	<u>710.00</u>
106	320	206	160	Design application filing fee	<u> </u>
107	490	207	245	Plant filing fee	<u> </u>
108	710	208	355	Reissue filing fee	<u> </u>
114	150	214	75	Provisional application filing fee	<u> </u>
SUBTOTAL (1) \$					<u>710.00</u>

2. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	<u>46</u>	- 46** = <u>0</u>	X <u> </u>	= <u>0</u>
Independent Claims	<u>10</u>	- 10** = <u>0</u>	X <u> </u>	= <u>0</u>
Multiple Dependent			<u> </u>	= <u> </u>

**Or number previously paid, if greater; For Reissues, see below.

Large Entity		Small Entity		Fee Description
Code	Fee (\$)	Code	Fee (\$)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) \$ 0

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

<u>Large Entity</u>		<u>Small Entity</u>		<u>Fee Description</u>	<u>Fee Paid</u>
<u>Code</u>	<u>Fee (\$)</u>	<u>Code</u>	<u>Fee (\$)</u>		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for ex parte reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	390	216	195	Extension for reply within second month	
117	890	217	445	Extension for reply within third month	890.00
118	1,390	218	695	Extension for reply within fourth month	
128	1,890	228	945	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,240	241	620	Petition to revive - unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	For filing a submission after final rejection (see 37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (see 37 CFR 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
195	300	195	300	Publication fee for early, voluntary, or normal publication	
196	300	196	300	Publication fee for republication	
194	130	194	130	Request for voluntary publication or republication	
098	130	098	130	Processing fee under 37 CFR 1.17(i)	
091	1,240	091	1,240	Acceptance of unintentionally delayed claim for priority	

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) \$ 890.00

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:Typed or Printed Name: Michael J. MallieSignature: _____ Date: April 18, 2001Reg. Number: 36,591 Telephone Number: 408-720-8300

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.



EXPRESS MAIL CERTIFICATE OF MAILING

"Express Mail" mailing label number: EL 371006804US

Date of Deposit: 4/18/01

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

Mara E. Brown

(Typed or printed name of person mailing paper or fee)

Mara E. Brown
(Signature of person mailing paper or fee)

4/18/01
(Date signed)

Serial/Patent No.: *** Filing/Issue Date: ***
Client: Ricoh Corporation
Title: METHOD FOR COMPRESSION USING REVERSIBLE EMBEDDED
WAVELETS

BSTZ File No.: 74451.P024C Atty/Secty Initials: MJM/mzb
Date Mailed: 04/18/01 Docket Due Date: 01/20/01

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | |
|---|---|
| <input type="checkbox"/> Amendment/Response (____ pgs.) | <input checked="" type="checkbox"/> Express Mail No. <u>EL371006804</u> <input checked="" type="checkbox"/> Check No. <u>42248</u> |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate) | <input checked="" type="checkbox"/> <u>Three</u> Month(s) Extension of Time <u>US</u> Amt: <u>\$710.00</u> |
| <input type="checkbox"/> Application - Utility (____ pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO 1449 (____ pgs.) <input checked="" type="checkbox"/> Check No. <u>42249</u> |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (____ pgs.) | <input type="checkbox"/> Issue Fee Transmittal Amt: <u>\$890.00</u> |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) | <input checked="" type="checkbox"/> Petition for Extension of Time |
| <input checked="" type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (<u>2</u> pgs.) | <input type="checkbox"/> Petition for _____ |
| <input type="checkbox"/> Application - Design (____ pgs.) | <input checked="" type="checkbox"/> Postcard |
| <input type="checkbox"/> Application - PCT (____ pgs.) | <input type="checkbox"/> Power of Attorney (____ pgs.) |
| <input type="checkbox"/> Application - Provisional (____ pgs.) | <input checked="" type="checkbox"/> Preliminary Amendment (<u>18</u> pgs.) |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (____ pgs.) |
| <input checked="" type="checkbox"/> Certificate of Mailing | <input type="checkbox"/> Response to Notice of Missing Parts |
| <input type="checkbox"/> Declaration & POA (____ pgs.) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.) | <input type="checkbox"/> Transmittal Letter, in duplicate |
| <input type="checkbox"/> Drawings: _____ # of sheets includes _____ figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate |

☐ Other: _____

